CDT 002 (Rev. 12/99)

Application for Commercial Driver Training

☐ 5 YRS

POINTS

Instructor License

Commercial Driver Training School Section P. O. Box 27412 Richmond, Virginia 23269-0001 (804) 367-9156

FEES: \$50 – One Year License \$100 - Two Year License NOTE: License must be concurrent with school license and that fee is prorated. ☐ Original (First-time application) **TYPE OF APPLICATION** (please check one): Renewal Transfer Reinstatement Upgrade IDENTIFYING INFORMATION INSTRUCTOR NAME FIRST NAME OF COMMERCIAL SCHOOL WHERE EMPLOYED SCHOOL PHONE NUMBER LAST MAILING ADDRESS (P. O. BOX/STREET) SCHOOL ADDRESS (STREET, P.O. Box only not acceptable) (CITY/STATE) (ZIP +4) (CITY/STATE) (ZIP + 4)HOME ADDRESS (P.O. BOX/STREET) Have you ever been convicted of a law violation, including moving traffic violations but excluding offenses committed before your eighteenth birthday which were finally adjudicated in If yes, please list and explain (attach additional sheets as needed): (CITY/STATE) (ZIP + 4)HOME PHONE NUMBER DRIVER OPERATOR NUMBER AND EXPIRATION DATE INSTRUCTOR LICENSE NUMBER (if previously licensed) **INSTRUCTOR EXPERIENCE AND HISTORY** • All instructors providing classroom and/or in-car instruction must possess five years of driving experience. Have you been properly licensed to drive a motor vehicle in Virginia for a minimum of five years? ☐ Yes ☐ No If no, please attach evidence of minimum driving experience requirements through licensure from another state. 2 Driving records of all instructors providing classroom and/or in-car instruction must reflect no more than six demerit points. Does your driving record reflect no more than six demerit points? ☐ Yes ☐ No ❸ Will you provide training for students under the age of nineteen?
☐ Yes
☐ No If no proceed to certification section of this form. 4 All instructors of student under nineteen years of age must have successfully completed six (6) semester hours in driver education approved by the Department of Motor Vehicles consisting of: 3 semester hours in Introduction to Driver Education: Driver Task Analysis and 3 semester hours in Instructional Principles of Teaching Driver Education or have a valid Virginia teaching certificate with a driver education endorsement: Have you completed these requirements? Yes **EMPLOYER CERTIFICATION** I certify that the above named individual is an employee, or has applied to become an employee, of this driving school in a position that involves the training of individuals in the operation of motor vehicles. PRINT NAME OF SCHOOL SIGNATURE OF OWNER/MANAGER DATE EMPLOYEE CERTIFICATION I hereby make application for a commercial driver training school instructor license and certify that all facts contained in this appplication are true and valid. By my signature I authorize the Department of Motor Vehicles to verify that my Virginia driver's record fulfills the requirements for my licensing under current statute and regulations. SIGNATURE DATE THIS SECTION FOR DMV USE **CLERK STAMP** FEE/ACCOUNT CONTROL REMARKS: LICENSE NUMBER **VERIFICATION OF** ☐ TEACHING CERTIFICATE □ COURSE TRANSCRIPT ☐ APPROVED STATE POLICE CRIMINAL □ DISAPPROVED BACKGROUND CHECK DRIVER HISTORY CHECK □ DATA ENTRY

Note: If not previously licensed, a certified transcript of courses or a copy of a valid Virginia teaching certificate with a driver education endorsement must accompany this application.